FEB 1 0 2005

PART B - FEE(S) TRANSMITTAL

nd send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

INSTRUCTIONS: This for appropriate. All further con indicated unless corrected i maintenance fee notification	m should be used for tran respondence including the selow or directed otherwise is.	smitting the ISSUI Patent, advance ord in Block 1, by (a)	or Fax E FEE and PUB ders and notificat) specifying a new	(703) 746-4000 LICATION FEE (If required from of maintenance free to correspondence address	uired). Blocks I through S al will be mailed to the current e; and/or (b) indicating a sepa	hould be completed wher correspondence address a trate "FEE ADDRESS" fo
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 12/14/2004				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Bach additional paper, such as a assignment or formal drawing, must have its own certificate of mailing or transmission.		
Lerner David Litt 600 South Avenue Westfield, NJ 0709	Mentlik LLP		Certificate of Malling or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimal transmitted to the USPTO (703) 746-4000, on the date indicated below.			
2005 SSITHIB2 0000001	8 121095 09658174			,		(Depositor's name)
						(Signature
1501 1400.00 DA						(Des
APPLICATION NO.	FILING DATE	l E	PERST NAMED IN	/ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
0976963174	09008000000000000000000000000000000000	A 7 14.65	Hirold See	THE PROPERTY OF STREET	x/ai9@#9x0029	3464
APPLN. TYPE	SMALL ENTITY	ISSUE FE	ZB	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		50	\$1400	03/14/2005
EXAM	EXAMINER ART U		IT T	CLASS-SUBCLASS		
COBURN, CORBETT B 371		3714		463-038000	_	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent automoves or agents OR, alternatively, (2) the name of a single firm (baving as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agent). If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND						
PLEASE NOTE: Unless recordation as set forth in	an assigned is identified be 37 CFR 3.11. Completion	clow, no assignee of of this form is NOT	data will appear of a substitute for f	m the percent. If an assig iling an assignment.	nce is identified below, the d	locument has been filed fo
(A) NAME OF ASSIGN				CITY and STATE OR CO		
Sony Compute	Sony Computer Entertainment Inc.					
-	assignee category or catego				Corporation or other private gre	oup entity Government
		Ah.	. Payment of Fee(-		
4a. The following fee(a) are	enclosed:				nciosea.	
4a. The following fee(a) are			A check in the	• • •		
4a. The following fee(a) are	mall entity discount permits	sd)	Payment by c	redit card. Form PTO-203		credit any overpayment, to opy of this form).
4a. The following fee(a) are Issue Fee Publication Fee (No a	mall entity discount permits Copies	zd)	Payment by c	redit card. Form PTO-203	8 is attached.	credit any overpayment, b opy of this form).
4a. The following fee(s) are I Issue Fee Publication Fee (No a Advance Order - # of 5. Change in Eatity Status a. Applicant claims St	mail entity discount permits Copies (from status indicated above MALL ENTITY status. See	ed) s) 37 CFR 1.27.	Payment by control of the Director Deposit Account	redit card. Form PTO-203 Is hereby suthorized by Number	8 is attached.	FR. 1,27(g)(2).

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, proparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commenta, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 11/04) Approved for use through 04/30/2007.

Arnold H. Krumholz

Authorized Signature

Typed or printed name

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

25,428

2/10/05

Registration No.



PTO/S8/97 (08-00)
Approved for use through 10/31/2002. OMB 0851-0031
U. S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1996, no persons are regulard to respond to a collection of Information unless it displays a valid CMS control number

FACSIMILE TRANSMISSION

ATTORNEY DOCKET NO.: SCEI 3.0-029

APPLICATION NO.: 09/658,174

CONFIRMATION NO.: 3464

MAILING DATE OF NOTICE OF ALLOWANCE: December 14, 2004

FAX NUMBER: (703) 746-4000

PAGES INCLUDING COVER SHEET: 2

PLEASE ACKNOWLEDGE RECEIPT TO SENDER AT (908) 654-7866.

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on February 10, 2005
Date

Signature Amoid H. Krumholz; Reg. No. 25,428

Typed or printed name of person signing Certificate

ונגם

544100_1.DOC